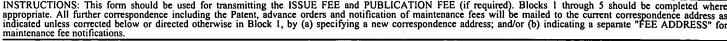
Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>



CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. The papers. Each addition	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must		
		THIS L L P		Ce	e of mailing or transmission.  rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for finit Stop ISSUE FEE address PTO (703) 746-4000, on the	smission  Ig deposited with the Unite  Ist class mail in an envelop  I above, or being facsimil  date indicated below.	
7/2005 MBEYENE2 0000	0023 09714553 /		∞/			(Depositor's name)	
C:1501 C:8001	1400.00 00 6.00 0	JUN 0 3 2005	SEICE SEICE			(Signature)	
APPLICATION NO.	FILING DATE	CE TOUDENDE	IRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/714,553			Hiroyuki	Suzuki	018656-190	5481	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	ı	\$0	\$1400	06/23/2005	
EXAMINER		ART UN	т	CLASS-SUBCLASS	ו		
DANG, DUY M		2621		382-286000	ı		
Change of correspondence address (or Change of Correspondences form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Curnumber is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINT			or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
				• •••	nee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
MINOLTA CO	OSAKA-SHI, OSAKA, JAPAN						
lease check the appropriate	assignee category or category	ories (will not be pri	nted on the pa	tent): 🗖 Individual 🚨 C	Corporation or other private gr	roup entity Governmer	
A. The following fee(s) are enclosed:			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			A check in	i the amount of the fee(s) is en by credit card. Form PTO-203	nclosed. 8 is attached		
Advance Order - # of					charge the required fee(s), or (enclose an extra c	credit any overpayment, 1	
	(from status indicated above MALL ENTITY status. See	e)			LL ENTITY status. See 37 C		
he Director of the USPTO	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	ion Fee (if any I from anyone Office.	r) or to re-apply any previous other than the applicant; a reg	ly paid issue fee to the applic sistered attorney or agent; or t	ation identified above. the assignee or other party	
nterest as shown by the reco	IM O()	10	<u>C</u>	- 6	3-05		
Authorized Signature	Ullean Chorse	NE EN 3083	3,10	Date	1 No. 22,124		

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.